

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 164
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Women Speak Out PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Darius Beverly		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2014
Mailing Address 157 Bishop Drive		Amount 75.00
City Avondale	State LA	Zip Code 70094
Purpose of Expenditure Salary	Category/ Type 001	Transaction ID : 5fb6b6c7-526c-4b46-a Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2014
Name of Federal Candidate Ms. Mary L Landrieu		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Ms. Dinah Beverly		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2014
Mailing Address 157 Bishop Drive		Amount 75.00
City Avondale	State LA	Zip Code 70064
Purpose of Expenditure Salary	Category/ Type 001	Transaction ID : 8e6264a2-800b-48e4-9 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2014
Name of Federal Candidate Ms. Mary L Landrieu		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 31 / 2014

Signature